

ARIZONA DEPARTMENT OF CHILD SAFETY
BEST INTEREST DETERMINATION &
TRANSPORTATION PLAN



Instructions

The Every Student Succeeds Act/ESSA directs that youth experiencing foster care are to be maintained in their school of origin unless it is in the student's best interest to enroll in a new school. The school of origin is the school in which a student is enrolled at the time of entry into foster care. When the foster care living arrangement changes and the student (after a best interest determination is made) enrolls in a new school, the new school becomes the school of origin. Discuss and summarize the following topics with the student, parent, IDEA or surrogate parent (if assigned), school of origin, and caregiver. Discuss concerns and make efforts to reach consensus by the conclusion of the IED. Representatives from a proposed new school may be invited when circumstances indicate a higher potential for a change in school enrollment. Examples include when the student is entering or returning from an out-of-state living arrangement, entering a prospective permanent living arrangement, or exiting a juvenile justice or behavioral health setting. Note: Additional space available for comments on page four (4).

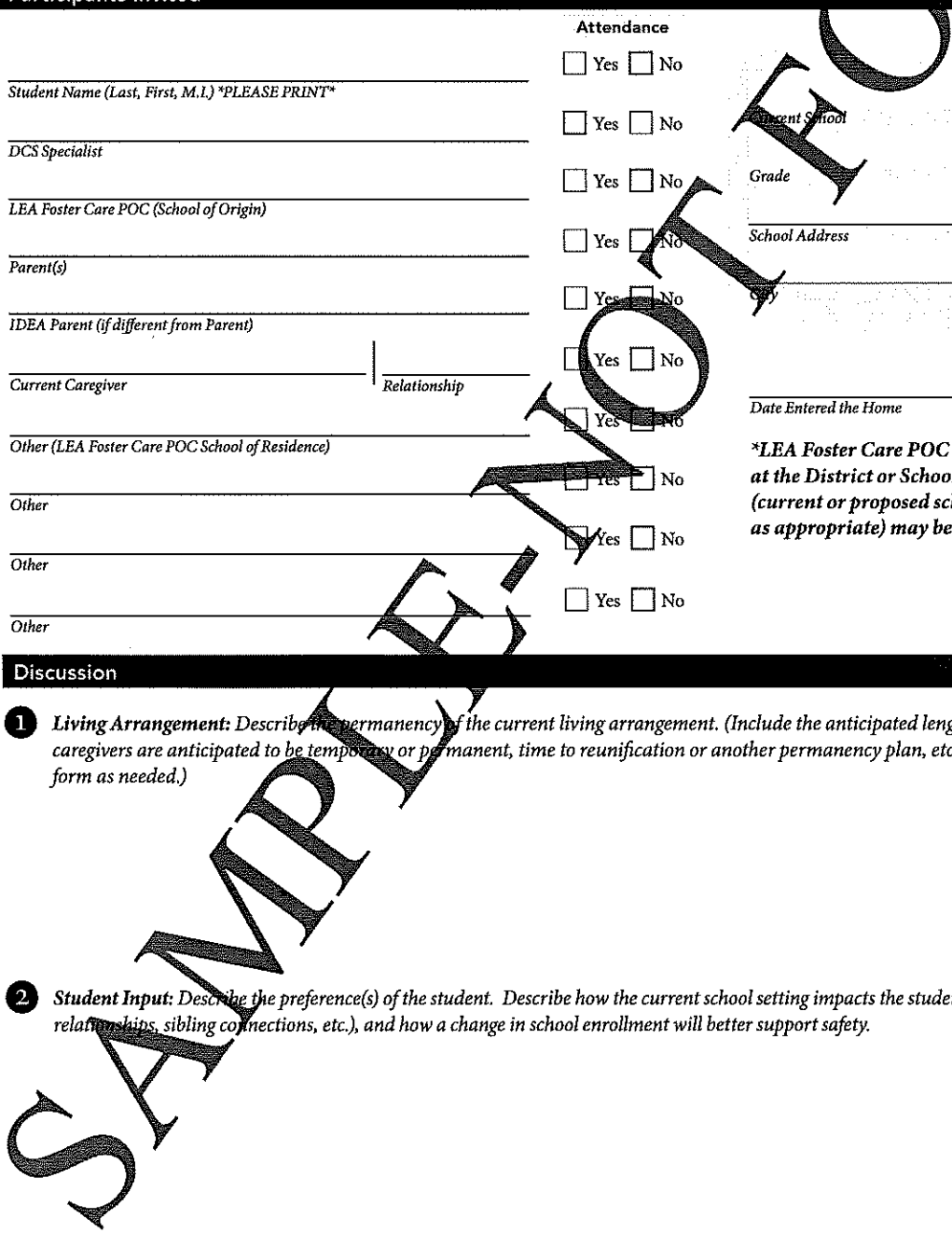
Participants Invited

<p>_____ <i>Student Name (Last, First, M.I.) *PLEASE PRINT*</i></p> <p>_____ <i>DCS Specialist</i></p> <p>_____ <i>LEA Foster Care POC (School of Origin)</i></p> <p>_____ <i>Parent(s)</i></p> <p>_____ <i>IDEA Parent (if different from Parent)</i></p> <p>_____ <i>Current Caregiver</i> _____ <i>Relationship</i></p> <p>_____ <i>Other (LEA Foster Care POC School of Residence)</i></p> <p>_____ <i>Other</i></p> <p>_____ <i>Other</i></p> <p>_____ <i>Other</i></p>	<p>Attendance</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>_____ <i>Current School</i></p> <p>_____ <i>Grade</i></p> <p>_____ <i>School Address</i></p> <p>_____ <i>City</i> _____ <i>State</i> _____ <i>ZIP</i></p> <p>_____ <i>Date Entered the Home</i></p> <p>*LEA Foster Care POC is the designated point of contact at the District or School level. Additional school staff (current or proposed school, including ESS staff as appropriate) may be listed as "Other."</p>
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Discussion

- 1 **Living Arrangement:** Describe the permanency of the current living arrangement. (Include the anticipated length of stay, whether or not the caregivers are anticipated to be temporary or permanent, time to reunification or another permanency plan, etc. Provide the Notice to Provider form as needed.)

- 2 **Student Input:** Describe the preference(s) of the student. Describe how the current school setting impacts the student's safety (physical environment, peer relationships, sibling connections, etc.), and how a change in school enrollment will better support safety.



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Discussion ~ continued

- 3** *Parent Input (including biological, IDEA and surrogate parent, as applicable): Describe the preference(s) of the parent. Also note if a parent other than the biological parent holds the Education Rights.*

- 4** *Academic (general): Describe the student's academic progress and how that progress may be impacted by a change in school enrollment. (For high school students, also address credits earned/transferrable, availability of courses such as advanced placement, vocational electives, foreign language, etc.)*

- 5** *Academic (Exceptional Education/English Language Learners [ELL]): Check box(es) as applicable and describe the student's instructional need (including behavioral related needs) and school services currently provided to address those needs, including exceptional education (504, IEP) and any ELL service needs, etc.* IEP 504 ELL Other: _____

- 6** *Social Connections/School Connectedness: Describe the student's school connections (including friendships, positive connections with adults at school, participation in academic and other clubs, music & arts participation (i.e. band, chorus, theater, etc.) and participation in sports or sports-related team membership, etc.). Would a change of school create a barrier to maintaining connections?*

- 7** *Current Caregiver Input & Considerations: Summarize information the current caregiver provides about the school of residence (pros and cons as related to the student's needs) and describe any special needs of the current caregiver (i.e. household composition and responsibilities to other household members) that may require supports to maintain school stability.*

- 8** *Feasibility (i.e. ability to...): Describe the distance and time required for the student to remain in their home school. Consider the student's age and developmental needs (ability to tolerate the travel requirement).*

SAMPLE NOT FOR USE

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Transportation Plan (Check all that apply)

<input type="checkbox"/> Caregiver directly to school	<input type="checkbox"/> Another responsible adult to bus stop
<input type="checkbox"/> Another responsible adult directly to school	<input type="checkbox"/> DCS provided (public or private transportation)
<input type="checkbox"/> School provided (designated bus or other service)	<input type="checkbox"/> Other (explain below):
<input type="checkbox"/> Caregiver to bus stop	

Identify the person(s) responsible for providing transportation, including name(s) and phone number(s).

When transportation is provided by the school, include specific bus route information (locations, times, bus number(s)). For DCS contract transportation, include the mode (public bus pass/bus card, private cab/van, etc.) and specify the vendor name and contact information as applicable. Include any other information necessary to ensure student safety. Public transportation should only be utilized when the student is of an appropriate age, has received instruction and practice in the use of public transportation, and prefers this method of transportation.

Best Interest Determination for School Change

Complete only when the student will be enrolled in a new school: Summarize the decision to enroll the student in a new school and identify the school for enrollment. (Note any concerns expressed and efforts to resolve the concerns.)

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Additional Notes

Use this space as for additional notes in reference to previous form questions. For additional clarity be sure to direct the reader to this page such as: "Please see additional notes on page 4" and then reference the originating question such as "Additional notes from question 6:"

SAMPLE-NOT FOR USE

My signature below indicates the information on this form to be true and accurate.

DCS Specialist

Email

Phone No.

Equal Opportunity Employer/Program. The Department of Child Safety (DCS) prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics, or retaliation or any other status protected by federal law, state law, or regulation. Reasonable accommodations to allow a person with a disability to take part in a program, service, or activity are available upon request. To request this document in alternative format or for further information about this policy contact your local office. TTY/TDD Services: 7-1-1. Free language assistance for DCS services is available upon request. Ayuda gratuita con traducciones relacionadas con los servicios del DCS esta disponible a solicitud del cliente.